Prod	oduction Date(s):	
Locat	cation(s):	
Taler	lent Information:	
•	• Name:	
•		
•	City, State, ZIP Code:	
•		
•	Email Address:	

Agreement:

I, the undersigned, hereby grant to Sandy Rowley, its agents, successors, assigns, and licensees (collectively referred to as "Producer"), the irrevocable, royalty-free, worldwide right and permission to photograph, film, or record my likeness, voice, and performance (collectively referred to as "Media") and to use, reproduce, distribute, and display such Media in any and all media formats now known or hereafter devised, for any purpose whatsoever.

I acknowledge that I am participating in this project on a voluntary basis without any financial compensation. I understand that the Producer will own all rights, including copyright, in the Media. I hereby waive any right to inspect or approve the finished product or the advertising copy that may be used in connection with the Media.

I release and discharge the Producer from any and all claims, demands, or causes of action that I may have by reason of this authorization, including any claims for libel, defamation, invasion of privacy, or infringement of rights of publicity or copyright.

Additional Terms (if any): Sandy Rowley is not responsible for any injuries on or off set. Assumption of Risk and Waiver of Liability:

I, the undersigned, hereby acknowledge and agree to the following:

1. **Voluntary Participation:** I understand that my participation in the production of the film and/or photography project is voluntary and that I am not entitled to any financial compensation for my participation.

- 2. **Assumption of Risk:** I acknowledge that participating in the production may involve inherent risks, including but not limited to, physical exertion, equipment-related injuries, and other unforeseen hazards. I voluntarily assume all risks associated with my participation in this project.
- 3. **Release of Liability:** I hereby release, discharge, and hold harmless [Your Name or Production Company], its agents, employees, volunteers, successors, assigns, and any other parties involved in the production (collectively referred to as "Producer") from any and all claims, demands, or causes of action that may arise from any injury, illness, loss, or damage to person or property incurred during or in connection with my participation in the project, whether on or off set.
- 4. **Medical Treatment:** I authorize the Producer to seek medical treatment on my behalf in the event of an emergency, accident, or illness. I agree to be responsible for any and all costs associated with such medical treatment.
- 5. **No Insurance Coverage:** I understand that the Producer does not carry or maintain health, medical, or disability insurance coverage for me. I am responsible for my own insurance coverage in the event of injury or illness resulting from my participation in the project.
- 6. **Acknowledgment of Understanding:** I have read this Liability Waiver and Release, fully understand its terms, and acknowledge that I am giving up substantial rights, including the right to sue. I sign this document freely and voluntarily without any inducement.

I certify that I am at least 18 years of age. If I am under 18 years of age, I have obtained the required consent from my parent or guardian as evidenced by their signature below.

Signa	ature:	Date:	
Parei	nt/Guardian Signature (if applical	ble):	
Print	ed Name of Parent/Guardian:		
Cont	act Information of Parent/Guardi	an:	
	Phone Number:Email Address:		
	ucer's Representative:		
	Name:Sandy RowleySignature: Date:		